

After a Critical Incident

The First 24 Hours After and Event:

- Periods of strenuous physical exercise, alternated with relaxation will alleviate some of the physical reaction.
- Structure your time - keep busy.
- You're normal and having normal reaction - don't label yourself crazy.
- Talk to people - talk is the most healing medicine.
- Be aware of numbing the pain with over use of drugs or alcohol, you don't need to complicate this with a substance abuse problem.
- Reach out - people do care.
- Maintain as normal a schedule as possible.
- Spend time with others.
- Help your co-workers as much as possible by sharing feelings and checking out how they are doing.
- Give yourself permission to feel rotten and share your feeling with others.
- Keep a journal; write your way through the sleepless hours.
- Do things that feel good to you.
- Realize those around you are under stress.
- **Don't make any big life changes.**
- Do make as many daily decisions as possible which will give you a feeling of control over your life, if some one asks you what to eat-answer them even if you're not sure.
- Get plenty of rest.
- Recurring thoughts, dreams or flashbacks are normal - don't try to fight them - they'll decrease over time and become less painful.
- Eat well-balanced and regular meals (even if you don't feel like it).

For Family Members & Friends

- Listen carefully.
- Spend time with the traumatized person.
- Offer your assistance and a listening ear if they have not asked for help.
- Reassure them that they are safe.
- Help them with everyday tasks like cleaning, cooking, caring for the family, and minding children.
- Give them some private time.
- Don't take their anger or other feelings personally.
- Don't tell them that they are "lucky it wasn't worse" - that statement does not console traumatized people. Instead, tell them that you are sorry such an event has occurred, and you want to understand and assist them.

We recommend that these incidents that should be an "AUTOMATIC CALL OUT". This means that the critical incident response team should always be contacted for each of these events.:

1. Work related death
2. Serious line of duty injury
3. Suicide of a co-worker
4. Multi-casualty incident
5. Violence that ends with injury or death

These are incidents for which you should consider contacting the critical incident response team to elect recommendations for intervention:

1. Death or violence to a child
2. A prolonged event, with negative results
3. Incident with extensive media attention
4. Knowing the victim of the event
5. Incident charged with profound emotion

For Information Contact:
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School/Adolescent Informational Sheet

A volunteer team of public safety professionals serving regional fire, EMS, law enforcement, school, and industrial organizations involved in any type of critical incident.

Services provided at no charge:

Individual Peer Support

Crisis Management Briefing

Defusing

Debriefing

Follow-Up

To Request Service/Response:

1-800-567-4673



Adults and Stress

You have experienced a traumatic event or a critical incident (any incident that causes a person to experience unusually strong emotional reactions which have the potential to interfere with their ability to function). Even though the event may be over, you may now be experiencing, or may experience later, some strong emotional or physical reactions. It is very common, in fact quite **normal**, for people to experience emotional after shocks when they have passed through a horrible event.

Sometimes the emotional aftershocks (or stress reactions) appear immediately after the traumatic event. Sometimes they may appear a few hours or a few days later. And, in some cases, weeks or months may pass before the stress reactions appear.

The signs and symptoms of a stress reaction may last a few days, a few weeks, a few months, or occasionally longer, depending on the severity of the traumatic event. With understanding and the support of loved ones, the stress reactions usually pass more quickly. Occasionally, the traumatic event is so painful that professional assistance from a counselor may be necessary. This does not imply craziness or weakness. It simply indicates that the particular event was just too powerful for the person to manage by himself or herself.

Talking to Children about Death & Grief Reactions

There are no recipes or formulas for grieving. Many factors affect how a child grieves including developmental stage of life of the child(ren), maturity, previous exposure to death and loss, and family dynamics. Social support can be offered to the child(ren) by family members, extended family members, friends, and neighbors.

Common Signs of Stress

Here are some very common signs and signals of a stress reaction:

Physical

Fatigue
Nausea
Muscle tremors
Twitches
Chest pain*
Difficulty breathing*
Elevated B/P
Headache
Thirst
Profuse sweating
Chills
Shock symptoms*
Vomiting
Weakness
Grinding teeth
Visual difficulties
Dizziness

Emotional

Anxiety
Guilt
Grief
Denial
Severe panic
Emotional shock
Fear
Uncertainty
Agitation
Intense anger
Apprehension
Loss of emotional control or depression
Feeling overwhelmed
Inappropriate emotional response

Cognitive

Confusion
Poor attention
Poor decisions
Heightened/Lowered alertness
Problems w/hyper—vigilance
Difficulty recognizing familiar things
Poor problem solving
Poor abstract thinking
Nightmares
Loss of orientation—time, place, person
Intrusive images

Behavioral

Changes in society
Changes in speech patterns
Loss/increase appetite
Withdrawal
Emotional outburst
Pacing
Startle reflex
Alcohol consumption
Inability to rest
Changes in sexual function
Erratic acts
Antisocial behavior
Non-specific bodily complaints
Changes in communication skills

* - Seek medical attention

Typical Post Crisis Behaviors for Children

Pre-School or Kindergarten Age Children

Normal Reactions

Separation anxiety
Self-comforting
Frustration
Difficulty interacting

Concerning Reactions

Uncontrolled sleep
Drifting off
Eating disruption
Loss of Physical Control
Fighting
Assaults
Pandemonium
Isolation behavior

Elementary Age Children

Normal Reactions

Anxiety
Fear
Withdrawal
Frustration
Difficulty interacting
Rule testing

Concerning Reactions

Regression
Uncontrolled acting out
Fighting
Assaults
Pandemonium
Isolation behavior
Behavioral contagion

Middle / High School Age Children

Normal Reactions

Anxiety
Fear
Withdrawal
Frustration
Difficulty interacting
Rule testing
Emotional Contagion

Concerning Reactions

Regression
Uncontrolled acting out
Substance abuse
Fighting
Assaults
Pandemonium
Isolation behavior
Behavioral contagion

Recommended Referral to Medical/Mental Health

Uncontrolled hysteria
Disconnection
Immobility
Inability to protect self
Profound hopelessness
Profound helplessness
Profound powerlessness